SUPPLEMENT TO THE

BRITISH MEDICAL JOURNAL

LONDON SATURDAY SEPTEMBER 27 1958

CONTENTS

Annual Clinical Meeting: Programme - - - 147
Registrars Oppose Minister's Proposals - - - 149
Joint Annual Meeting, 1959 - - - - - 149
Committee to Review Medical Services - - - 149
Contractual Validity of Spens - - - - - - 149
Correspondence - - - - - - - 150
H.M. Forces - - - - - - - - 151
Association Notices - - - - - - - 152

British Medical Association

President: Professor A. P. THOMSON, *M.C.*, M.D., F.R.C.P.

ANNUAL CLINICAL MEETING—SOUTHAMPTON, DECEMBER 4–7, 1958

LOCAL OFFICERS:

Chairman: R. S. RUSSELL-SMITH, M.R.C.S., L.R.C.P.

Honorary General Secretary: J. G. MCDOWELL, T.D., M.D., 64, Langhorn Road, Swaythling, Southampton, Hants.

Honorary Science Secretary: R. P. W. SHACKLETON, M.R.C.S., L.R.C.P., F.F.A. R.C.S., D.A., Department of Anaesthetics, Southampton General Hospital, Shirley, Southampton.

Executive Officer: Miss B. E. MIDDLEMISS, B.M.A. House, Tavistock Square, London, W.C.1. (Euston 4499.)

PROGRAMME

The 1st Annual Clinical Meeting of the British Medical Association will be held in Southampton from the evening of Thursday, December 4, to midday Sunday, December 7, 1958. The following is a résumé of the proposed programme.

Thursday, December 4.—In the evening the Mayor and Corporation of Southampton will hold a reception in the Guildhall, to welcome members attending the Meeting.

Friday, December 5.—There will be a concentrated scientific programme all day in the Guildhall, starting with panel discussions at 10 a.m. and followed by a general session. During the luncheon interval there will be colour television (sponsored by Smith Kline and French Laboratories Ltd.) of surgical operations at the General Hospital, Shirley, Southampton. In the afternoon there will be another general session followed by a Transatlantic Clinical Conference in connexion with the American Medical Association Clinical Meeting in Minneapolis, and medical films. In the evening there will be an informal reception given by the Southampton Division of the B.M.A.

Saturday, December 6.—The morning scientific programme in the Guildhall will be similar to that on Friday, concluding with the colour television showings from 12.40 to 2 p.m. In the afternoon a series of live clinical demonstrations have been arranged at local hospitals. In the evening a dinner has been arranged by the Southampton Division of the B.M.A.

Sunday, December 7.—In the morning a number of visits to places of medical interest in the locality have been arranged.

Ladies

While no special programme is being arranged for them, ladies accompanying members will be welcome to attend the evening social functions and the Sunday morning visits to places of medical interest in the area.

Catering Arrangements

A buffet luncheon and a licensed bar will be available at the Guildhall on the Friday and Saturday.

Advance Registration

In order to assist the local organizers it is requested that members wishing to attend the Annual Clinical Meeting at Southampton should write as early as possible for a registration form to the Executive Officer, B.M.A. House, Tavistock Square, London, W.C.1. There is no registration fee.

Private Hospitality

Some private hospitality will be offered by members of the Southampton Division. Any members wishing to take advantage of this offer are asked to state their requirements in writing to the Honorary General Secretary, Dr. J. G. McDowell, T.D., 64, Langhorn Road, Swaythling, Southampton, Hants.

Hotel Accommodation

There is adequate hotel accommodation in the district at varying prices. The following is a list of hotel accommodation in Southampton and district. Members wishing to reserve accommodation are asked to write direct to the hotel, stating that they are attending the B.M.A. Meeting. The

Name and Address of Hotel	Tel. No.	No. of Bedrooms	Tariff B B from
* Alder Hey, Archers Road	22046	8	15 6
* Archers Court, Archers Road	24156	20	19 6
* Banister Guest House, 11, Brighton Road	21279	9	15/–
Botleigh Grange, Botley Road	Botley 39	35	22/6
Clausentum, Banister Road (Club)	24470	12	17/6
* Cotswold, Highfield Lane, Portswood	54300	30	21/–
* County, Hulse Road	24236	21	19/6
Dolphin (Trust Houses, Ltd.), High Street	26178	70	25/–
* Earley Guest House, Peartree Avenue, Bitterne	48117	14	17/6
* Elizabeth Guest House, 44, The Avenue	24327	7	19/6
* Escot Guest House, 64, Portsmouth Road, Woolston	48732	12	16/6
* Langholm, 202, Regents Park Rd., Shirley	71739	10	17 6
* Linacres, Cobden Avenue, Bitterne Park	56897	12	18/6
Northlands, Northlands Road	22871	14	21/–
* Ordnance, Ordnance Road	24789	16	18/–
Polygon, The Polygon	26401	134	35/–
Potters Heron, Ampfield, Nr. Romsey	Chandlers-ford 2448	3	25/–
* Rothesay, 54, Westwood Road	57424	17	12/6
Royal, Cumberland Place	23467	100	24/–
* St Regulus, 5, Archers Road	24243	27	18/6
Stafford House, Winn Road	55292	34	21/–
Star, High Street	26199	24	22 6
* Twyford House, Hulse Road	24213	18	18 6
West Cliff Hall, Hythe	Hythe 2277	50	22/6

* Unlicensed.

Association cannot accept responsibility for any of the prices stated below; applicants should therefore verify the tariffs when making their reservations.

DETAILS OF MEETING

Thursday, December 4

8 to 10 p.m. Reception in Guildhall given by Mayor and Corporation of Southampton.

Friday, December 5

10 to 10.45 a.m. *Panel Discussions.* (1) Hand Injuries: Mr. J. N. BARRON (Salisbury), chairman, Mr. L. W. PLEWES (Luton), and Mr. R. J. PULVERTAFT (Derby). (2) Treatment and Prevention of Deafness: Mr. N. W. MACKEITH (Southampton), chairman, Mr. F. MCGUCKIN (Newcastle upon Tyne), and Miss EDITH WHETNALL (London).

10.50 a.m. Official opening of the Meeting by the President of the Association, Professor A. P. THOMSON, in the Guildhall.

11 a.m. *General Session.* Chairman: Dr. H. C. MAURICE WILLIAMS (Southampton). Professor JOHN BRUCE (Edinburgh): The Choice of Operation for Duodenal Ulceration. 11.30 a.m. Professor L. P. GARROD (London): Prevention of Antibiotic Reactions. 12 noon. Dr. D. M. T. GAIRDNER (Cambridge): Sudden Death in Infancy.

12.40 to 2 p.m. *Colour Television:* Demonstrations of surgical operations. (1) Mr. E. F. CHIN, Thoracic Surgical Unit, Southampton: A cardiac operation. (2) Mr. J. E. LAING, Plastic and Oral Surgery Centre, Odstock: A skin-grafting operation. *Moderator:* Mr. H. H. LANGSTON, Southampton. *Studio Panel:* Chairman: Mr. J. N. BARRON, Salisbury; Dr. D. J. PEARCE, Southampton; Mr. E. T. FRENCH, Southampton.

2.15 p.m. *General Session.* Chairman: Dr. S. WAND (Birmingham). Dr. RAE GILCHRIST (Edinburgh): The Diagnosis of Myocardial Infarction. 2.45 p.m. Professor A. M. CLAYE (Leeds): The Prevention of Severe Toxaemia of Pregnancy. 3.15 p.m. Dr. NEVILLE OSWALD (London): Management of the Pulmonary Complications of Influenza.

4 to 5 p.m. *Transatlantic Clinical Conference* in connexion with the A.M.A. Meeting in Minneapolis.

5.15 to 6 p.m. *Medical films,* with commentary by Dr. R. PROSPER LISTON (Chairman of the B.M.A. Film Committee).

8 to 10 p.m. Informal reception given by the Southampton Division in the Palm Court Restaurant and Ballroom.

Saturday, December 6

10 to 10.45 a.m. *Panel Discussions.* (1) Eye Emergencies: Mr. E. C. ZORAB (Southampton), chairman, Mr. B. W. RYCROFT (East Grinstead), and Mr. A. G. LEIGH (London). (2) The Risks of Therapy: Dr. R. M. S. MCCONAGHEY (Dartmouth), chairman, Dr. RICHARD ASHER (London), and Mr. D. F. ELLISON NASH (London).

11 a.m. *General Session.* Chairman: Dr. I. D. GRANT (Glasgow). Sir RUSSELL BRAIN (London): Acroparaesthesiae. 11.30 a.m. Dr. JOHN T. INGRAM (Leeds): The Restless Skin. 12 noon. Professor E. STENGEL (Sheffield): Common Misconceptions about Suicide and Attempted Suicide.

12.40 to 2 p.m. *Colour Television.* (1) Mr. E. C. ZORAB, Southampton Eye Hospital: Corneal transplant. (2) Mr. J. S. ELLIS, Department of Orthopaedic Surgery, Southampton: A hand operation. (3) Mr. L. A. RICHARDSON, Royal South Hants Hospital, Southampton: Stripping of varicose veins. *Moderator:* Mr. H. H. LANGSTON, Southampton. *Studio Panel:* Chairman: Mr. TOM ROWNTREE, Southampton; Mr. B. W. RYCROFT, East Grinstead; Mr. D. E. MACRAE, Southampton.

PROGRAMME OF LIVE CLINICAL DEMONSTRATIONS AND CLINICS

Saturday, December 6, 2.30–5 p.m.

SOUTHAMPTON GENERAL HOSPITAL

Medicine.—Dr. H. K. MELLER, Dr. P. G. TODD, Dr. T. K. MORGAN: Clinical demonstration of some cases of thyroid disease. Discussion of diagnostic methods and treatment.

Surgery.—Mr. S. N. LYTLE: Clinical demonstration of some cases of Crohn's disease.

Obstetrics and Gynaecology.—Mr. R. W. KNOWLTON, Mr. D. R. KILGOUR, Mr. A. G. W. HILL: Clinical cases.

Anaesthetics.—Dr. D. J. PEARCE, Dr. R. S. WALSH: Some problems arising during the treatment of patients suffering from respiratory insufficiency.

Geriatrics.—Dr. T. RUDD, Dr. R. N. GREENHALGH: Clinical demonstration of various patient hoists showing actual nursing techniques.

Neurology.—Dr. G. S. GRAVESON, Dr. P. K. ROBINSON: Clinical demonstration of patients with angiomata and aneurysms.

Otorhinolaryngology.—Mr. A. RUSSELL, Mr. N. W. MACKEITH, Mr. B. SUGDEN, Mr. E. M. SEWELL: Clinical cases.

Pathology.—Dr. S. C. DOBSON: Investigation of bleeding and clotting defects, and other haematological problems.

Radiology.—Dr. R. B. BOAL, Dr. R. D. CATON, Dr. D. V. RICE: Exhibition of interesting *x*-ray films.

ROYAL SOUTH HANTS HOSPITAL

Medicine.—Dr. K. M. ROBERTSON, Dr. R. J. MCGILL: Clinical demonstrations.

Surgery.—Mr. L. A. RICHARDSON: Peripheral vascular disease and its treatment.

Children's Surgery. — Mr. TOM ROWNTREE, Dr. G. ORMISTON, Dr. D. A. J. WILLIAMSON, Dr. J. GUY: Symposium on Diseases of the Urinary Tract in Infancy and Childhood.

Dermatology.—Dr. A. J. GRIMSTON: Clinical demonstrations.

Orthopaedic Surgery.—Mr. H. H. LANGSTON, Mr. J. S. ELLIS, Mr. D. E. MACRAE: Clinical demonstration of orthopaedic cases and treatment.

Pathology.—Dr. E. S. DUTHIE, Dr. R. A. GOODBODY: (1) Demonstrations of routine examinations of general interest in biochemistry, haematology, and bacteriology. (2) Morbid anatomy: miscellaneous conditions—e.g., renal and liver disease.

Physiotherapy.—Dr. J. R. PRESTON, Dr. G. SAVILLE: Demonstrations of electromyography. Demonstration of methods of traction used in treatment of prolapsed intravertebral disk.

Radiology.—Dr. R. B. BOAL, Dr. R. D. CATON, Dr. D. V. RICE: Exhibition of interesting *x*-ray films.

Radiotherapy.—Dr. A. G. C. TAYLOR: Demonstration of the Rotating Caesium Telecurie Treatment Unit.

SOUTHAMPTON EYE HOSPITAL

Mr. E. BACON, Mr. A. B. MOFFATT, Mrs. JANET SIMPSON, Mr. E. C. ZORAB: Demonstration, with clinical cases and colour slides, of (1) The type of cases which are worth while referring to ophthalmic surgeons, including cases showing acrylic lens after cataract extraction, plastic operations, dacryocystorhinostomy, glaucoma. (2) The type of case which can be safely and satisfactorily treated by the general practitioner.

SOUTHAMPTON CHEST HOSPITAL

Pathology.—Mr. E. F. CHIN, Dr. W. M. MACLEOD: Clinical demonstration of patients with diseases of the heart, lungs, and oesophagus. Dr. R. V. GIBSON: The spectrum of mitral valve disease. Dr. J. GUY: Identification of tubercle bacilli and testing for drug sensitivity. Dr. E. S. MACHELL: The anaesthetist in relation to thoracic surgery.

Transport will be provided from the Guildhall to the various hospitals between 2 and 2.30 p.m., and between hospitals during the afternoon, returning to the Guildhall at 5.30 p.m.

Tea will be provided in each hospital during the afternoon.

7.30 for 8 p.m. Dinner at the Pier Pavilion. Ticket 25s. (including aperitifs but excluding wine). (Dinner jackets.)

Visits to Places of Medical Interest in the Wessex Area
Sunday, December 7, Morning

1. The Department of Daily Living, Winchester (Dr. RUSSELL GRANT).
2. The Plastic and Oral Surgery Centre, and the Nuffield Rehabilitation Unit, Odstock, Salisbury (Mr. J. N. BARRON, Dr. H. GLANVILLE).
3. The Medical Services of Fawley Oil Refinery (Dr. A. WARD GARDNER).
4. The Veterinary Artificial Insemination Centre, Lyndhurst, by invitation of Mr. G. N. GOULD.
5. County Borough of Southampton, Department of Health and Welfare. Visit to the Ocean Terminal for port health organization. Visits to Welfare Clinics and Old People's Homes. By invitation of the Medical Officer of Health, Dr. H. C. MAURICE WILLIAMS, O.B.E.

NOTE: The Winchester Division is arranging a reception for those visiting the Department of Daily Living. This visit is timed so that members and their wives may attend Matins at the Cathedral beforehand.

The Salisbury Division is arranging a reception for visitors to the Plastic and Oral Surgery Centre, Odstock.

REGISTRARS OPPOSE MINISTER'S PROPOSALS

NEW POSTS CRITICIZED

Reports received from various regions at a recent meeting of the Hospital Junior Staffs Group Executive Committee showed that hospital medical staffs (both senior and junior) are very largely opposed to the Minister's proposal to appoint a limited number of special posts for time-expired senior registrars. The Executive Committee's view was that, however attractive the rate of remuneration, registrars should not accept these new posts, and it decided to advise hospital junior medical staffs to resist their establishment.

Such a system, even if said to be on a temporary basis, would be a retrograde step, the Committee thought, for it would mean a new grade of senior registrar with duties of a highly responsible nature. Furthermore, it would be invidious to select posts to be occupied by only some of the time-expired senior registrars. It has always been the policy of the Group that, pending a permanent solution of the registrar problem, all time-expired senior registrars should be given security of tenure and an increase of salary above the present maximum. The Minister's proposal virtually introduced another grade into the hospital staffing structure and might well tempt boards to establish special posts when an additional consultant appointment would be more appropriate. There appeared, too, to be a danger that if a senior registrar, through financial exigency, were to apply for one of the special posts he would risk being stigmatized as "a failed consultant" and might well find himself in an appointment with no prospects of promotion.

Finally, the Group Executive Committee pointed out, the Minister's proposal in no way solved the immediate or the long-term problem of senior registrars. A fresh generation of senior registrars would very shortly be seeking consultant appointments, and the desperate situation in which many present senior registrars found themselves would be extended to many now in their early years in the grade. The Group Executive is circulating its views to other committees.

TRADE UNION MEMBERSHIP

The following is a list of local authorities which are understood to require employees to be members of a trade union or other organization:

Metropolitan Borough Councils.—Fulham.
Non-County Borough Councils.—Crewe.

JOINT ANNUAL MEETING, 1959

PRINCE PHILIP UNABLE TO ATTEND

In reply to an inquiry recently addressed to Buckingham Palace, the Association has been informed that the President-Elect, His Royal Highness the Prince Philip, Duke of Edinburgh, is very sorry that he will be unable to attend the Joint Annual Meeting of the British and Canadian Medical Associations in Edinburgh next July, as His Royal Highness will be with the Queen in Canada during the whole of that month.

COMMITTEE TO REVIEW MEDICAL SERVICES

CHAIRMAN APPOINTED

Sir Arthur Porritt has agreed to act as chairman of the committee to review the medical services which is being set up under the joint sponsorship of the Royal Colleges, the Scottish Royal Medical Corporations, the British Medical Association, the College of General Practitioners, and the Society of Medical Officers of Health. The sponsoring committee, on which each of these bodies is represented, will meet shortly to discuss with the chairman the constitution of the new committee.

CONTRACTUAL VALIDITY OF SPENS

MINISTER REJECTS SPECIAL CASE

The Secretary of State for Scotland has rejected the B.M.A.'s suggestion that he should join with it in the presentation of a special case to the Scottish Court of Session for its opinion on the contractual validity of the G.P. Spens Report. The Chairman of Council, Dr. S. Wand, announced to the Representative Body at Birmingham on July 12 that the Secretary of State for Scotland had been asked to consent to the presentation of such a special case (*Supplement*, July 19, p. 80). The procedure of a "special case" is peculiar to Scottish law, and differs from the usual type of contentious litigation in that the parties amicably agree to present their differing views to the Court for objective decision. The difference of opinion between the Association and the Secretary of State for Scotland, as the Minister responsible for the Health Service in Scotland, which the Association sought the Minister's consent to raise in this case was on the interpretation of the contractual obligations of the Government resulting from its acceptance of the Spens Report and the Danckwerts Award. It has always been the Association's contention that the Government was under a contractual and moral obligation, whether or not it could be enforced by legal proceedings in the ordinary way, to implement the promises which were made to the profession when they entered the National Health Service, and the Association's view has been that a proper interpretation of the Spens Reports was that remuneration should be adjusted from time to time in accordance, among other things, with changes in the value of money. The Government refused to admit any contractual obligation when the profession lodged its claim for an increase in remuneration in 1956, and in a letter to Dr. Macrae, Secretary of the Negotiating Committee, the Permanent Secretary to the Ministry of Health wrote: "If the Committee are not prepared to accept the Ministers' views as to this, no doubt the matter can be brought before the courts for adjudication" (*Supplement*, December 1, 1956, p. 201).

The text of the letter from the Permanent Secretary to the Department of Health conveying the Minister's refusal is as follows:

I am directed by the Secretary of State to refer to your letter of 10th July regarding the interpretation of certain documents relating to the remuneration of general practitioners in the National Health Service.

As you will know this question of interpretation was the subject of discussion and correspondence between the Ministers and the British Medical Association some time ago and the Association were informed in November, 1956, that Ministers were of the opinion that no contractual obligation such as was alleged by the Negotiating Committee of the British Medical Association existed and that no action based on such a claim could succeed.

Subsequently a Royal Commission was appointed under the Chairmanship of Sir Harry Pilkington which is at present considering among other things the remuneration of general practitioners.

With this in mind and after careful consideration of the whole circumstances the Secretary of State has decided that he cannot accept the B.M.A.'s suggestion that he should join with them in the presentation of a Special Case to the Court of Session.

Copies of this letter are being sent to the Secretary, Ministry of Health, and to Sir Harry Pilkington.

B.M.A.'S COMMENTS

The Scottish Council of the B.M.A. held a press conference in Edinburgh on September 23, at which were present Dr. W. M. Knox, Chairman of the Scottish Council, Dr. C. Harrower, Dr. J. G. M. Hamilton, Dr. A. Macrae, Secretary, and Dr. E. R. C. Walker, Scottish Secretary. The B.M.A. spokesmen commented that the Secretary of State had rejected the B.M.A.'s offer without asking to see the Association's draft of the stated case and that he had been "less than candid" in his reference to the Ministers' letter of November, 1956, in failing to mention the statement in it that if the B.M.A. was not prepared to accept the Ministers' view the matter could "be brought before the courts for adjudication." Despite the fact that the suggestion of obtaining a legal decision on the disputed question came originally from the Government, the Secretary of State had now rejected this approach, and it might be assumed, the B.M.A. spokesmen pointed out, that the Government was now less confident about the probable result of the suggested legal proceedings. It was further pointed out that the Secretary of State's reference to the Royal Commission was irrelevant in this context, since it had been made clear that the Commission would not adjudicate on the legal issue, which was therefore not *sub judice*.

Correspondence

Because of heavy pressure on our space, correspondents are asked to keep their letters short.

The Wrong Meaning

SIR,—After 10 years of the Health Service one is almost every day coming across instances where members of the public in general and quite a high proportion of patients persist in thinking that the whole of the weekly insurance contribution goes towards payment for the Health Services, and this notion often finds expression in the good-humoured jibe—"I may as well have my money's worth, doctor!" Of all remarks made by the contemporary patient, and they are many, this is one with the more serious implications, totally misconceived, and, as it happens, pregnant with the wrong meaning.

The latest instance I have noticed of this widespread impression is to be found in a leading daily paper dated September 9. In the article headed "Cost of Living in London for Young People" we read that "She (Susan) finished at her secretarial college six months ago and her weekly salary after deductions for income tax and National Health insurance amounts to £7 5s." Well, well, here we are again. All the poor girl's insurance contribution is apparently paid to the Ministry of Health towards the cost of doctors, medicine, and hospitals. This is exactly the interpretation which will be put on such statements by thousands of readers.

Is it not high time, Sir, that the Ministry of Health and the B.M.A. again organized adequate publicity through radio, TV, press, and posters to tell the people the facts? This matter would be comparatively unimportant but for one big topical phenomenon of the greatest significance to every doctor in the country—viz., the Royal Commission. If official bodies and important persons, including lay people in responsible positions, all think that a more than adequate sum is being contributed each week by every wage earner to pay for drugs and to keep the Health Services and the doctors going, then indeed we are not going to invite much sympathy or congratulation when the great day arrives and the doctors get—or do not get—more pay. Most people think that they are already paying more than enough—to the Health Services. Please may we have an urgent resolution of this utter muddle and obtuseness of thought in public circles, which one fears may be causing and will cause indirectly a great deal of harm, by inference, to the medical profession now standing pilloried and inert, awaiting the verdict.—I am, etc.,

Hailsham, Sussex. P. A. HUBBARD.

Study for the D.P.H.

SIR,—Dr. Arnold Shaw (*Supplement*, September 6, p. 136) has stated perfectly the economic facts of the D.P.H. I agree with him on most points, but I believe that Dr. G. D. Rees (*Supplement*, August 23, p. 128) shows greater realism when he states that the D.P.H. examination should be open to anyone qualified for a few years. There are many assistant medical officers, with ten years' or more experience of the public health service and the R.A.M.C., who have found it an economic impossibility to combine family responsibilities with a career in social medicine.

Surely a study of the questions set in a typical D.P.H. paper reveals that they can be answered without the necessity of attending a university course. Take an example, "Discuss the value of fluoridization of water," or another, "Describe the facilities provided by a local authority for the care of the elderly," and it is apparent that the subject could be accomplished from textbooks and local experience in public health work. The highest medical administrative post of the country, that of the Minister of Health, has been held by an ex-miner, an ex-lawyer, an ex-stockbroker. Did any of them have a D.P.H.? Yet they were the leading group healers when they held their appointments.

This is the age of the "economic mean." Those below the mean are pulled up to it, and those above are depressed down to it. It is damaging to the cause of group healing no less than individual healing when the medical profession itself joins hands with social forces to further depress the "economic mean" of its members.—I am, etc.,

Wolverhampton. GARETH R. DAVIES.

Operating Theatre Technicians

SIR,—As secretary of the Association of Operating Theatre Technicians I would like to express, on behalf of the executive council and all our members, our grateful thanks and appreciation to Mr. William Gissane (*Supplement*, August 9, p. 117), and the subsequent support by the other correspondence that has appeared in the *British Medical Journal*, to his plea for recognition of the important service rendered by the operating theatre technicians.

The aims and objects of the association have for the past twelve years been to promote a better service in this field of hospital employment by a system of educational training in theatre duties, and later by examinations, whereby the surgical and nursing staffs in the theatre will have a qualified technician as part of the theatre team; added to this, a salary comparable to such as those who hold important offices in other fields of the hospital service.

The association has in the past met with considerable opposition, but this has so diminished to be practically nil with regard to the hospitals, for by the information and requests received concerning the acquisition of a qualified theatre technician it is evident that they are much sought

after. The armed Services of the Crown educate and train their operating theatre technicians. Why not, then, the hospitals controlled by the National Health Service ?—I am, etc.,

London, N.9. F. C. RADFORD,
Secretary,
Association of Operating Theatre Technicians.

Interim Payment

SIR,—Surely by now it must be obvious to everyone that the recent statement of the Ministry that the economical state of the country would not allow an interim payment to doctors is sheer nonsense. One sees and hears of nothing but prosperity in every direction, and it is high time that the profession who have done their best with the National Health Service for 10 years should share in the nation's apparent success.—I am, etc.,

London, S.W.16. D. G. ALLEN.

Grants for Postgraduate Courses

SIR,—In my article on Postgraduate Education for the General Practitioner (*Journal*, September 6, p. 580) I said that "the Ministry will not pay for a locum when a doctor in partnership attends an intensive course." I am now informed that this statement is not completely true. In approved cases the Ministry will pay the fees for a locum, provided that he is specifically engaged to carry out the work of the partner who is attending an intensive refresher course of one or two weeks.—I am, etc.,

Winchester. G. SWIFT.

Cost of Prescribing

SIR,—We thought you would be interested to hear that our reply (*Supplement*, August 9, p. 118) to a letter on cost of prescribing brought response from well over 300 doctors. You will also be interested to hear that we have personally written to each of these doctors, sending a copy of our *Prescribers List* where applicable.

This response, to our way of thinking, underlines two fundamental points—first, the interest that medical men show in your correspondence columns, and, secondly, the need for a "comprehensive list of medical products with prices." The need has become so obvious to us that early next year we shall be issuing a 1959 list, suitably enlarged, to over 30,000 doctors and consultants concerned with the National Health Service.—I am, etc.,

London, S.W.17. F. LEWIS WATSON,
Managing Director, Unichem Limited.

Reorganization of General Practice

SIR,—May I be allowed to reassure Mr. D. G. Wilson Clyne (*Supplement*, September 6, p. 136) that, among urban general practitioners, what are interpreted by an unfortunate few as the overwhelming evils of the National Health Service fortunately assume their proper perspective in the minds of the majority as minor irritations ? There is certainly no material factor inherent either in the N.H.S. or in any urban environment which need be allowed to impair the family doctor's ability to maintain high clinical standards. Let all would-be reorganizers of general practice remember, however, that a considerable part of the general practitioner's work concerns many matters of a para- and non-clinical nature, and to supplant him from among his patients and place him in the relatively impersonal atmosphere of the hospital would certainly deter patients from seeking his help in such matters.

Close co-operation between the hospital and the general practitioner is, of course, becoming increasingly essential. It is, however, not a question of reorganization but simply of mutual good will.—I am, etc.,

Widnes, Lancs. DOUGLAS MILLINGTON.

Paying for Medical Care

SIR,—I think the time has come for the profession to give notice to the country that the Government's refusal to consider the doctors' claim for increased remuneration may lead to them taking only patients in a low income group on their lists. Unfortunately, this may lead to two types of treatment—utility and "proper." This is a state of affairs which the profession has been trying to avoid since 1920. Both Government and country must face the fact that they spend far less on medical care in proportion to population than, for example, the Scandinavian countries. Cheeseparing on the provision of hospitals and the remuneration of qualified professional men will do a grave disservice to the N.H.S. and treatment of the sick generally in the near future. The advances in medical and social science over the last 10 years have increased the work demanded of all branches of medicine so that, for example, the general practitioner cannot be expected to deal with more than 2,750 patients properly, as opposed to the 3,500 he may have now. Forty-eight million pounds are regarded as essential expenditure on a rocket, so let us all come down to earth and realize that the Treasury must free a greater sum from its coffers for the N.H.S. in all its branches.—I am, etc.,

Ipswich. ROY WEBB.

H.M. Forces

ROYAL NAVY

Surgeon Rear-Admiral E. T. S. Rudd, C.B., C.B.E., has retired.

Surgeon Captain T. B. Lynagh has retired.

Surgeon Commanders T. F. Davies, S. H. R. Price, M. A. Rugg-Gunn, and I. C. Macdonald to be Surgeon Captains.

Surgeon Commander T. A. Turnbull has retired.

Surgeon Lieutenant-Commander (Acting Surgeon Commander) W. H. B. Ellis, A.F.C., to be Surgeon Commander.

Surgeon Lieutenant-Commander W. Cullen to be Surgeon Commander.

Surgeon Lieutenant-Commander P. R. Morgan has retired.

Surgeon Lieutenant P. F. Toal to be Surgeon Lieutenant-Commander.

ROYAL NAVAL VOLUNTEER RESERVE

Surgeon Commanders J. A. Shepherd, V.R.D., and P. de B. Turtle, V.R.D. and Clasp, to be Surgeon Captains.

Surgeon Commander A. R. Harper, V.R.D., has retired.

Surgeon Lieutenant-Commanders J. F. McHarg, H. R. Gray, C. F. Cooper, D. C. Lillie, and W. P. Small to be Surgeon Commanders.

Surgeon Lieutenant-Commander S. D. Moss has been removed from the Active List.

Surgeon Lieutenant-Commander L. V. Gimson, V.R.D., has retired.

Surgeon Lieutenants B. Concannon, P. R. French, J. S. Campbell, and J. B. MacMillan to be Surgeon Lieutenant-Commanders.

ROYAL ARMY MEDICAL CORPS

Lieutenant-Colonel T. McG. McNie, O.B.E., has retired on retired pay.

Captains M. M. Whiteley, J. D. Hughes, N. W. J. England, W. P. Maclay, and D. F. Conway to be Majors.

Captain (Temporary Major) T. S. Hart to be Major.

Short Service Commissions.—Major H. T. Chiswell, O.B.E., has relinquished his commission on completion of service, and has been granted the honorary rank of Colonel. Captain (Honorary Major) C. R. Harris to be Captain, and has been granted the acting unpaid rank of Major.

REGULAR ARMY RESERVE OF OFFICERS

Major-Generals T. Young, C.B., O.B.E., and F. R. H. Mollan, C.B., O.B.E., M.C., late R.A.M.C., having attained the age limit of liability to recall, have ceased to belong to the Reserve of Officers.

Colonel A. McMillan, late R.A.M.C., having attained the age limit of liability to recall, has ceased to belong to the Reserve of Officers.

ARMY EMERGENCY RESERVE OF OFFICERS

ROYAL ARMY MEDICAL CORPS

Major (Acting Lieutenant-Colonel) F. S. Mooney has resigned his commission.

Captain (Acting Lieutenant-Colonel) A. Murphy to be Major.

Captains (Acting Majors) R. C. King, P. Stuart, and T. B. Boulton to be Majors.

Captain B. W. Rhodes to be Major.

TERRITORIAL ARMY

ROYAL ARMY MEDICAL CORPS

Lieutenant-Colonel E. H. P. Smith, T.D., has retired, and has been granted the honorary rank of Lieutenant-Colonel.

Captains W. Davison, F. P. Cassidi, G. A. Hanks, E. W. Walton, D. St. J. Murphy, and J. A. R. Parker to be Majors.

Captain T. M. Dauncey has been granted the acting rank of Major.

HER MAJESTY'S OVERSEAS CIVIL SERVICE

The following appointments have been announced: E. E. Bassey, L.S.M., Medical Superintendent, Federal Medical Department, Federation of Nigeria; N. R. E. Fendall, M.B., B.S., D.T.M.&H., Assistant Director of Medical Services, Kenya; A. J. McKendrick, M.B., Ch.B., D.P.H., D.M.R.D., Specialist Radiologist, Tanganyika; Ng Nen Ling Teckham, M.B., F.R.C.S., Assistant Orthopaedic Surgeon, Health Department, Mauritius; J. R. H. Humphreys, M.B., B.S., Medical Officer, North Borneo; A. D. Sinclair, M.B., Ch.B., D.A., Medical Superintendent, Barbados; J. F. Tattersfield, M.B., B.S., Medical Officer, Uganda; H. M. Williams, M.B., B.S., Medical Officer, S.P.H.S., Fiji.

Association Notices

PRIZE ESSAY COMPETITION FOR PROVISIONALLY REGISTERED PRACTITIONERS, 1959

The Council of the British Medical Association is prepared to consider the award, in 1959, of prizes to provisionally registered practitioners for essays submitted in open competition. The subject of the essay is: "To what extent are experiments on animals essential for medical progress?"

Any provisionally registered practitioner in the pre-registration year at the time of submission of the essay is eligible to compete for a prize. No study or essay that has previously appeared in the medical press or elsewhere will be considered eligible for a prize.

If any question arises in reference to the eligibility of a candidate or the admissibility of his or her essay, the decision of the Council of the British Medical Association shall be final. Should the Council decide that no essay entered is of sufficient merit, no award will be made. At least one prize of £50 is offered. In determining the number of prizes to be awarded, the Council will take into consideration the number and standard of essays received.

Essays must not exceed 5,000 words, and must be typewritten or legibly written in the English language on foolscap paper, on one side only, must be unsigned, and must be accompanied by a note of the name and address of the entrant. Notice of entry for this competition is necessary and a form of application can be obtained from the undersigned.

Essays must be forwarded so as to reach the Secretary of the British Medical Association not later than January 31, 1959. Inquiries relative to the competition should be addressed to the Secretary, British Medical Association, B.M.A. House, Tavistock Square, London, W.C.1.

A. MACRAE,
Secretary.

Diary of Central Meetings

OCTOBER

1	Wed.	Consulting Pathologists Group Committee, 2 p.m.
1	Wed.	Film Committee (following showing of rehabilitation film at Hercules House at 2 p.m.).
1	Wed.	Private Practitioners Subcommittee, Private Practice Committee, 2.30 p.m.
2	Thurs.	Editorial Subcommittee, Joint Formulary Committee, 11 a.m.
3	Fri.	Executive Subcommittee, Science Committee, 11.30 a.m.
3	Fri.	Assistants and Young Practitioners Subcommittee, G.M.S. Committee, 2 p.m.
3	Fri.	Science Committee, 2 p.m.
8	Wed.	Occupational Health Committee, 10.30 a.m.
8	Wed.	Private Practice Committee, 12 noon.
10	Fri.	Ophthalmic Group Committee, 2 p.m.
16	Thurs.	G.M.S. Committee, 10.30 a.m.

NOVEMBER

5	Wed.	Welsh Committee (at George Hotel, Shrewsbury), 2.15 p.m.

Branch and Division Meetings to be Held

BROMLEY DIVISION.—At Beckenham Hospital, Wednesday, October 1, 8.15 for 8.30 p.m., meeting. Professor A. P. Thomson: "Education of Doctors in England." Guests are invited.

DARTFORD DIVISION.—At the Chest Clinic, Dartford, Thursday, October 2, 8.45 p.m., address by Dr. H. C. Calvey: "The Chest Clinic, Past, Present, and Future."

GLASGOW DIVISION.—At Glasgow Regional Office, 9, Lynedoch Crescent, Glasgow, Thursday, October 2, 8.30 p.m., meeting.

GREENWICH AND DEPTFORD DIVISION.—At St. Alfege's Hospital, Vanbrugh Hill, Greenwich, S.E., Wednesday, October 1, 8.30 p.m., meeting. B.M.A. Lecture by Professor P. Beaconsfield (Chicago University): "Recent Advances in the Surgery of Coronary Heart Disease." All medical practitioners in the area of the Division and in Lewisham and Woolwich are invited.

HOLLAND DIVISION.—At White Hart Hotel, Boston, Tuesday, September 30, 8 for 8.30 p.m., dinner. Mr. D. Wynn-Williams: "Plastic Surgery" (illustrated).

MANCHESTER DIVISION.—(1) At Fallowfield Hotel, Wilbraham Road, Manchester, Thursday, October 2, 8.30 p.m., annual meeting. (2) The Manchester Medical Ball, under the joint auspices of the Manchester Division of the B.M.A. and the Manchester Medical Students Representative Council, will be held in the Students' Union, Oxford Road, Manchester, on Thursday, October 23, 8 p.m. to 2 a.m. Music by "The Saints" and "The Squadronaires." Tickets, £2 per double ticket for graduates, 22s. 6d. per double ticket for students and pre-registration graduates.

MID-GLAMORGAN DIVISION.—At Twelve Knights Hotel, Margam Road, Port Talbot, Friday, October 3, 7.30 for 8 p.m., dinner, followed by address by Dr. Donald Isaac.

NORFOLK BRANCH.—At Samson and Hercules House, Norwich, Friday, October 3, 8 for 8.30 p.m., autumn ball. Dinner at 9 p.m.

NUNEATON AND TAMWORTH DIVISION.—At Red Lion Hotel, Atherstone, Tuesday, September 30, 7.30 for 7.45 p.m., supper; 8.30 p.m., valedictory lecture by retiring Chairman, Dr. E. S. M. Merry: "Milestones in Anaesthesia." Wives of members are invited.

SOUTH MIDDLESEX DIVISION.—At Mitre Hotel, Hampton Court, Thursday, October 2, 8.30 p.m., meeting. Lecture by Mr. C. Naunton Morgan: "Treatment of Minor Rectal Conditions in the Light of the Modern Conception of the Anatomy of the Anorectal Region" (illustrated).

WEMBLEY DIVISION.—At Board Room, Wembley Hospital, Tuesday, September 30, 8.30 p.m., meeting. (1) Address by Mr. John Shirley Callcutt: "A Visit to Brussels and the International College of Surgeons" (illustrated). (2) A short résumé of A.R.M., 1958 (Birmingham), by Dr. Philip H. Addison. Members of Harrow Division are invited.

WEST SUFFOLK DIVISION.—At Everard's Hotel, Tuesday, September 30, 8.30 p.m., B.M.A. Lecture by Dr. Francis Camps: "Medical Aspects of the Investigation of Homicide" (illustrated). Legal friends are invited.

Meetings of Branches and Divisions

BRISTOL DIVISION

The following officers have been elected:
Chairman.—Mr. A. Palin.
Chairman-elect.—Dr. W. J. S. Cameron.
Honorary Secretaries.—Dr. A. S. Anderson and Dr. Sarah Walker.
Honorary Treasurer.—Dr. C. Dix.

CHESTERFIELD DIVISION

The following officers have been elected:
Chairman.—Dr. J. F. Hanratty.
Vice-chairman.—Dr. R. T. Gaunt.
Honorary Secretary and Treasurer.—Dr. I. R. D. Proctor.

CLEVELAND DIVISION

The following officers have been elected:
Chairman.—Mr. J. C. Clark.
Vice-chairman.—Dr. W. P. Dunn.
Honorary Secretary and Treasurer.—Dr. J. N. Stirling.

DUMFRIES AND GALLOWAY DIVISION

The following officers have been elected:
Chairman.—Dr. F. T. Ingram.
Vice-chairman.—Dr. P. M. Kerr.
Honorary Secretary and Treasurer.—Dr. J. B. Wilson.

GOOLE AND SELBY DIVISION

The following officers have been elected:
Chairman.—Dr. E. Cretney.
Vice-chairman.—Mr. D. L. Shaw.
Honorary Secretary and Treasurer.—Dr. W. Wintersgill.

HARTLEPOOLS DIVISION

The following officers have been elected:
Chairman.—Dr. R. Martin.
Honorary Secretary and Treasurer.—Dr. H. W. Bisset.

9